

049 U.S. PTO

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05-23-01

PTO/SB/05 (11-00)

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR
1.53(b))

Attorney Docket No.	AA471
First Inventor	John Gregory Schroeder, et al.
Assignee	The Procter & Gamble Company
Title	A Kit for Caring For a Fabric Article
Express Mail Label No.	EK160952911US

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APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: **Commissioner for Patents**
Box Patent Application
Washington, D.C. 20231

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
 10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
 11. English Translation Document (*if applicable*)
 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
 13. Preliminary Amendment
 14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
 15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
 16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
 17. Other:

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No. /

Prior application information: Examiner:

Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

NAME	Frank C. Turner, B1S10 The Procter & Gamble Company				
ADDRESS	Sharon Woods Technical Center 11520 Reed Hartman Highway				
CITY	Cincinnati	STATE	Ohio	ZIP CODE	45241
COUNTRY	USA	TELEPHONE	513-626-3388	FAX	513-626-1933

Name (Print/Type)	Frank C. Turner	Registration No. (Attorney/Agent)	39,863
Signature		Date	

Burden Hour Statement This form is estimated to take 0 2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known*Application Number**Confirmation Number**Filing Date**First Named Inventor***J. G. Schroeder, et al.***Examiner Name**Group/Art Unit***TOTAL AMOUNT OF PAYMENT (\$)** 728.00*Attorney Docket No.***AA471****METHOD OF PAYMENT (check one)**

- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number **16-2480**Deposit Account Name **The Procter & Gamble Company**

- Charge Any Additional Fee Required Under status. See 37 CFR §127
37 C.F.R. §§1.16 and 1.17

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Code	(\$)	<u>Fee Description</u>	<u>Fee Paid</u>
105	130	Surcharge-late filing fee or oath	<input type="checkbox"/>
127	50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
139	130	Non-English specification	<input type="checkbox"/>
147	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="checkbox"/>
112	920*	Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>
113	1,840*	Requesting publication of SIR after Examiner's action	<input type="checkbox"/>
115	110	Extension for reply within 1 st month	<input type="checkbox"/>
116	390	Extension for reply within 2 nd month	<input type="checkbox"/>
117	890	Extension for reply within 3 rd month	<input type="checkbox"/>
118	1,390	Extension for reply within 4 th month	<input type="checkbox"/>
128	1,890	Extension for reply within 5 th month	<input type="checkbox"/>
119	310	Notice of Appeal	<input type="checkbox"/>
120	310	Filing a brief in support of an appeal	<input type="checkbox"/>
121	270	Request for oral hearing	<input type="checkbox"/>
138	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
140	110	Petition to revive - unavoidable	<input type="checkbox"/>
141	1,240	Petition to revive - unintentional	<input type="checkbox"/>
142	1,240	Utility issue fee (or reissue)	<input type="checkbox"/>
143	440	Design issue fee	<input type="checkbox"/>
144	600	Plant issue fee	<input type="checkbox"/>
122	130	Petitions to the Commissioner	<input type="checkbox"/>
123	50	Petitions related to provisional applications	<input type="checkbox"/>
126	240	Submission of IDS per property (times number of properties)	<input type="checkbox"/>
146	710	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
149	710	For each additional invention to be examined (37 CFR §1.129(b))	<input type="checkbox"/>
179	710	Request for Continued Examination (RCE)	<input type="checkbox"/>
169	710	Request for expedited examination of a design application	<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>

SUBTOTAL (1) (\$) [710.00]**2. EXTRA CLAIM FEES – Large Entity**

Extra <u>Claims</u>	Below <u>Fee</u>	Fee <u>Paid</u>
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Total Claims [21] - 20** = [1] x [18] = [18]

Independent Claims [3] - 3** = [] x [] = []

Multiple Dependent [] = []

** or number previously paid, if greater; For Reissues, see below

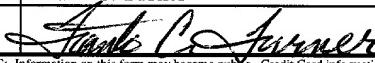
Code	(\$)	<u>Fee Description</u>
103	18	Claims in excess of 20
102	80	Independent claims in excess of 3
104	270	Multiple dependent claim, if not paid
109	80	**Reissue independent claims over original patent
110	18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$) [18.00]

* Reduced by Basic Filing Fee Paid

SUBTOTAL(3) (\$) []

Complete (if applicable)

Name (Print/Type)	Frank C. Turner	Registration No. (Attorney/Agent)	39,863	Telephone	(513) 626-3388
Signature				Date	May 22, 2001

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